

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

JOE WALSH

(b) Address (number and street)

2210 WOODLAWN PARK AVE.

☐ Check if address changed

2. Identification Number

HOIL08090

(c) City, State and ZIP Code

MCHEMRY

IL

60051

3. Is This Statement

☐ New (N)

OR

☒ Amended (A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State &amp; District of Candidate

IL 08

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

JOE WALSH FOR CONGRESS COMMITTEE, INC.

(b) Address (number and street)

830 W. ROUTE 22 -BOX 56

(c) City, State and ZIP Code

LAKE ZURICH

IL

60047

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

IL-08 CONGRESSIONAL VICTORY COMMITTEE

(b) Address (number and street)

264 N. Lumpkin St #202

(c) City, State and ZIP Code

Athens

GA

30601

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

JOE WALSH

Date

07/14/2011

**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

ILLINOIS HOUSE REPUBLICAN FRESHMEN

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(b) Address (number and street)

PO BOX 2719

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(c) City, State and ZIP Code

WASHINGTON

20013

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

GREAT EIGHT COMMITTEE

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(b) Address (number and street)

228 S WASHINGTON ST STE 115

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(c) City, State and ZIP Code

ALEXANDRIA

22314

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